

City of Franklin
9229 West Loomis Road
Franklin, Wisconsin 53132

VOLUNTEER FACT SHEET

Thank-you for your interest in serving on a City Board, Commission, or Committee. In order that consistent information be provided to the Common Council, you are asked to complete the following:

PERSONAL:

Name _____
Address _____
Phone Number _____
E-Mail _____
Length of Time a Franklin Resident _____
Alderman or District Number _____

AREA OF INTEREST: Please check the line next to the Board, Commission or Committee or area of greatest interest. If listing more than one, please prioritize your top three choices (3 being least priority).

<input type="checkbox"/> Architectural Board	<input type="checkbox"/> Civic Celebrations
<input type="checkbox"/> Community Development Authority	<input type="checkbox"/> Economic Development Commission
<input type="checkbox"/> Environmental Commission	<input type="checkbox"/> Ethics Board
<input type="checkbox"/> Fair Commission	<input type="checkbox"/> Finance Committee
<input type="checkbox"/> Fire and Police Commission	<input type="checkbox"/> Board of Health
<input type="checkbox"/> Library Board	<input type="checkbox"/> Parks Commission
<input type="checkbox"/> Personnel Committee	<input type="checkbox"/> Plan Commission
<input type="checkbox"/> Board of Public Works	<input type="checkbox"/> Board of Review
<input type="checkbox"/> Technology Commission	<input type="checkbox"/> Board of Water Commissioners
<input type="checkbox"/> Board of Zoning and Building Appeals	<input type="checkbox"/> Facility Needs Committee
<input type="checkbox"/> Impact Fee Task Force	<input type="checkbox"/> Waste Facilities Monitoring Committee

Why are you interested in joining this (these) particular Board and/or Commission?

VOLUNTEER OR WORK EXPERIENCE

(Begin with your most recent employment and continue with all past 10 years of employment. Please attach additional paper or include resume, if available.)

Company Name:	Address:	Telephone:
Date started:	Starting Position:	
Date left:	Position upon leaving:	
<u>Description of duties:</u>		

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ADDITIONAL EXPERIENCE OR QUALIFICATIONS: List any other experience, skills, or other qualifications, including hobbies, which you believe should be considered in evaluating your qualifications for volunteering.

Signature: _____ Date: _____

Applications are kept on file for 2 years.